

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

CLEARY, BRENDA LEWIS

ADDRESS (number and street)

PO BOX 28778

Check if different than previously reported. (ACC)

RALEIGH

NC

27611

2. FEC IDENTIFICATION NUMBER ▼

C C00553842

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NC

13

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Robert Dixon

Signature of Treasurer Robert Dixon

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

CLEARY, BRENDA LEWIS

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	14154.50	14654.50
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	14154.50	14654.50
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	2274.97	2274.97
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	2274.97	2274.97
8. Cash on Hand at Close of Reporting Period (from Line 27).....	17379.53	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	5000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

CLEARY, BRENDA LEWIS

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5975.00	5975.00
(ii) Unitemized.....	5995.50	5995.50
(iii) TOTAL of contributions from individuals ▶	11970.50	11970.50
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	2184.00	2684.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	14154.50	14654.50
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	5000.00	5000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	5000.00	5000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	19154.50	19654.50

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2274.97	2274.97
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	2274.97	2274.97

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	500.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	19154.50
25. SUBTOTAL (add Line 23 and Line 24).....	19654.50
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2274.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	17379.53

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 15
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CLEARY, BRENDA LEWIS

A. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 16 / 2014

Transaction ID : SA11AI.4317

Amount of Each Receipt this Period
 465.83

received these funds via ActBlue, Total earmarked through conduit; PAC limit not affected
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 23 / 2014

Transaction ID : SA11AI.4318

Amount of Each Receipt this Period
 48.02

received these funds via ActBlue, Total earmarked through conduit; PAC limit not affected
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 30 / 2014

Transaction ID : SA11AI.4319

Amount of Each Receipt this Period
 288.15

received these funds via ActBlue, Total earmarked through conduit; PAC limit not affected
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 15
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CLEARY, BRENDA LEWIS

A. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address P.O. Box 382110

City: Cambridge State: MA Zip Code: 02238-2110

FEC ID number of contributing federal political committee: **C**

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 02 / 06 / 2014

Transaction ID : SA11AI.4330

Amount of Each Receipt this Period: 1656.84

received these funds via ActBlue, Total earmarked through conduit; PAC limit not affected
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address P.O. Box 382110

City: Cambridge State: MA Zip Code: 02238-2110

FEC ID number of contributing federal political committee: **C**

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 02 / 13 / 2014

Transaction ID : SA11AI.4320

Amount of Each Receipt this Period: 48.02

received these funds via ActBlue, Total earmarked through conduit; PAC limit not affected
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address P.O. Box 382110

City: Cambridge State: MA Zip Code: 02238-2110

FEC ID number of contributing federal political committee: **C**

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: 02 / 20 / 2014

Transaction ID : SA11AI.4321

Amount of Each Receipt this Period: 959.51

received these funds via ActBlue, Total earmarked through conduit; PAC limit not affected
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CLEARY, BRENDA LEWIS

A. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 27 / 2014

Transaction ID : SA11AI.4322

Amount of Each Receipt this Period
 528.27

received these funds via ActBlue, Total earmarked through conduit; PAC limit not affected
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 06 / 2014

Transaction ID : SA11AI.4325

Amount of Each Receipt this Period
 168.08

received these funds via ActBlue, Total earmarked through conduit; PAC limit not affected
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : SA11AI.4328

Amount of Each Receipt this Period
 96.05

received these funds via ActBlue, Total earmarked through conduit; PAC limit not affected
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CLEARY, BRENDA LEWIS

A. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.4316

Amount of Each Receipt this Period
 336.17

received these funds via ActBlue, Total earmarked through conduit; PAC limit not affected
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.4314

Amount of Each Receipt this Period
 168.08

received these funds via ActBlue, Total earmarked through conduit; PAC limit not affected
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2014

Transaction ID : SA11AI.4313

Amount of Each Receipt this Period
 1224.61

received these funds via ActBlue, Total earmarked through conduit; PAC limit not affected
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 15
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CLEARY, BRENDA LEWIS

A. Full Name (Last, First, Middle Initial)
James Brassard

Mailing Address 4701 Ramsgate Lane

City State Zip Code
Bowie MD 20715

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Christain Community Presby. Ch pastor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 10 / 2014

Transaction ID : SA11AI.4255

Amount of Each Receipt this Period
100.00

Earmarked through ActBlue

B. Full Name (Last, First, Middle Initial)
Regan Brown

Mailing Address 109 Cape Cod Drive

City State Zip Code
Cary NC 27511

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
retired retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 12 / 2014

Transaction ID : SA11AI.4242

Amount of Each Receipt this Period
250.00

check

C. Full Name (Last, First, Middle Initial)
Woodie Samuel Cleary

Mailing Address 103 Highlands Lake Dr

City State Zip Code
Cary NC 27518

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NC Dept of Revenue IT Security Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 31 / 2014

Transaction ID : SA11AI.4208

Amount of Each Receipt this Period
2600.00

check

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2950.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 15
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CLEARY, BRENDA LEWIS

A. Full Name (Last, First, Middle Initial)
Beth Dixson

Mailing Address 2508 Winterbury Court

City Raleigh State NC Zip Code 27607

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation Executive Coach

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.4265

Amount of Each Receipt this Period
 500.00

Earmarked through ActBlue

B. Full Name (Last, First, Middle Initial)
Beth Dixson

Mailing Address 2508 Winterbury Court

City Raleigh State NC Zip Code 27607

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation Executive Coach

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : SA11AI.4275

Amount of Each Receipt this Period
 25.00

Earmarked through ActBlue

C. Full Name (Last, First, Middle Initial)
Margaret McClure

Mailing Address 129 Columbia Heights, apt 53

City Booklyn State NY Zip Code 11201

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 15 / 2014

Transaction ID : SA11AI.4227

Amount of Each Receipt this Period
 1000.00

check

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1525.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 15
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CLEARY, BRENDA LEWIS

A. Full Name (Last, First, Middle Initial)
Mary Mundt

Mailing Address 1746

City State Zip Code
Sashabaw Dr. MI 48864

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation
Nurse

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 22 / 2014

Transaction ID : SA11AI.4232

Amount of Each Receipt this Period
250.00
check

B. Full Name (Last, First, Middle Initial)
Nancy Ridenour

Mailing Address 900 Dartmouth NE

City State Zip Code
Albuquerque NM 87106

FEC ID number of contributing federal political committee. **C**

Name of Employer UNM Occupation
RN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 30 / 2014

Transaction ID : SA11AI.4146

Amount of Each Receipt this Period
1000.00
Earmarked through ActBlue

C. Full Name (Last, First, Middle Initial)
Roy Simpson

Mailing Address 325 Beverly Rd, NE

City State Zip Code
Atlanta GA 30309

FEC ID number of contributing federal political committee. **C**

Name of Employer not employed Occupation
Registered Nurse

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 30 / 2014

Transaction ID : SA11AI.4276

Amount of Each Receipt this Period
250.00
Earmarked through ActBlue

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

5975.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 15
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CLEARY, BRENDA LEWIS

A. Full Name (Last, First, Middle Initial)
BRENDA LEWIS CLEARY

Mailing Address PO BOX 28778

City RALEIGH State NC Zip Code 27611

FEC ID number of contributing federal political committee. **C H4NC13033**

Name of Employer self employed Occupation Nurse Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 584.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 04 / 2014

Transaction ID : SA11D.4424

Amount of Each Receipt this Period
 _____ 84.00

In-kind -

B. Full Name (Last, First, Middle Initial)
BRENDA LEWIS CLEARY

Mailing Address PO BOX 28778

City RALEIGH State NC Zip Code 27611

FEC ID number of contributing federal political committee. **C H4NC13033**

Name of Employer self employed Occupation Nurse Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2684.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2014

Transaction ID : SA11D.4211

Amount of Each Receipt this Period
 _____ 2100.00

check

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ 2184.00

_____ 2184.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 15
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CLEARY, BRENDA LEWIS

A. Full Name (Last, First, Middle Initial)
CLEARY, BRENDA LEWIS

Mailing Address **PO BOX 28778**

City **RALEIGH** State **NC** Zip Code **27611**

FEC ID number of contributing federal political committee. **C C00553842**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 / /
03 / 31 / 2014

Transaction ID : SA13A.4284

Amount of Each Receipt this Period
 5000.00

candidate loan

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

5000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 15	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CLEARY, BRENDA LEWIS

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address P.O. Box 382110		Amount of Each Disbursement this Period 50.39 Transaction ID : SB17.4422
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement credit card processing fee	Category/ Type 001
Candidate Name CLEARY, BRENDA LEWIS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 13	

Full Name (Last, First, Middle Initial) B. North Carolina State Board of Elections		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 441 N Harrington		Amount of Each Disbursement this Period 1740.00 Transaction ID : SB17.4246
City Raleigh	State NC	
Zip Code 27603	Purpose of Disbursement filing fee	Category/ Type
Candidate Name CLEARY, BRENDA LEWIS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 13	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1790.39
TOTAL This Period (last page this line number only).....	1790.39

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **CLEARY, BRENDA LEWIS** Transaction ID : **SC/10.4284**

LOAN SOURCE Full Name (Last, First, Middle Initial) **CLEARY, BRENDA LEWIS** *[PERSONAL FUNDS]* Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
 PO BOX 28778

City State ZIP Code
 RALEIGH NC 27611

Original Amount of Loan 5000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5000.00
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TERMS

Date Incurred M 03 / D 31 / Y 2014	Date Due M M / D D / Y 12/31/2014	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	5000.00
TOTALS This Period (last page in this line only).....	▶	5000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.